

REQUEST FOR APPLICATIONS (RFA): #0729-02-HAA

GOVERNMENT OF THE DISTRICT OF COLUMBIA

Office of the Chief Financial Officer

Office of Research and Analysis

**District of Columbia Department of Health
HIV/AIDS Administration**

**FY 2002–2003 Ryan White Title II, and Housing Support Services
Grant**



Invites the Submission of Applications for Funding under the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act of 1990 as amended by Public Law 104-146, the Ryan White CARE Act Amendments of 1996.

Announcement Date: July 26, 2002

RFA Release Date: July 29, 2002

Application Submission Deadline: September 6, 2002, 5:00 p.m.

**LATE APPLICATIONS WILL NOT BE FORWARDED TO THE
REVIEW PANEL**



NOTICE

PRE-APPLICATION CONFERENCE

FY 2002 Ryan White Title II and Housing Support Services Grant

Attendance Recommended

WHEN:

August 13, 2002

WHERE:

*OCFO TRAINING ROOM-A
941 North Capitol Street, NE, 4th Floor
Washington, DC 20002*

TIME:

1:00 pm – 3:00 pm

CONTACT PERSON:

*Aurora L. Delespin-Jones
Office of Research and Analysis
441 4th Street, NW, Washington, DC 20001
(202) 727-7775*



Checklist for Applications

FY 2002 Ryan White Title II and Housing Grant

- ☐ The applicant organization/entity has responded to all sections of the Request for Application.
 - ☐ The applicant Profile, found in Attachment A, contains all the information requested.
 - ☐ The Program Budget is complete and complies with the Budget forms listed in Attachment E of the RFA. The budget narrative is complete and describes the categories of items proposed.
 - ☐ The application is printed on **8½ by 11-inch paper, double-spaced, on one side, using 12-point type with a minimum of one inch margins**. **ORA will not forward applications to the review panel that do not conform** to this requirement.
 - ☐ The application summary and project description sections are complete and are within the 15-page limit for this section of the RFA submission.
 - ☐ The evaluation section is complete and is within the 5-page limit for this section of the RFA submission.
 - ☐ **The applicant is submitting the required six (6) copies of its application, “of the six (6) copies, one (1) copy must be an original. ORA will not forward the application to the review panel if the applicant fails to submit the required six (6) copies with one of the six-stamped “original”.**
 - ☐ The application format conforms to the “Application Format” listed in Section V, page 10 of the RFA. **The review panel will not review applications that do not conform to the application format.**
 - ☐ The Certifications and Assurances listed in Attachments B and C are complete and contain the requested information.
 - ☐ **The appropriate appendices are limited to two attachments including (1) proof of collaborations with other entities and (2) one additional attachment. ORA will not forward the application to the review panel if the applicant fails to comply with the requirement.**
 - ☐ The application is submitted to ORA no later than 5:00 p.m., on the deadline date of September 6, 2002.
 - ☐ The application is submitted with two original receipts, found in Attachment D, attached to the outside of the envelopes or packages for ORA's approval upon receipt.
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**District of Columbia
Department of Health
HIV/AIDS Administration**

Request for Applications (RFA): #0729-02-HAA

FY 2002-2003 Ryan White Title II and Housing and Support Services Grant

SECTION I GENERAL INFORMATION

The Department of Health (DOH), HIV/AIDS Administration (HAA) mission is to assess the status of HIV disease; develop and implement HIV prevention activities through promoting harm and risk reduction initiatives and encouraging behavior change; formulate policies and plans that address the needs of all sectors of the community; maximize the utilization of human, financial, technological and other resources; and assure that quality services are delivered in a timely and appropriate manner.

The District of Columbia Department of Health is soliciting applications from qualified applicants to provide Technical Assistance, develop HIV/AIDS demonstration projects to reach priority clients in targeted populations and to provide short-term transitional housing. Under this Request for Application (RFA), applicants may apply for funds to provide services in the following areas:

**Ryan White Title II: Support Services for Persons with HIV/AIDS
Housing Opportunities for Persons with HIV/AIDS (HOPWA)**

Target Population

The target populations are indigent, uninsured, and under-served persons who are HIV-infected and residents of the District of Columbia. In addition, each program area has a special target population identified for services.

Applicants must document linkages with other major organizations serving the target population(s) identified. Proof of collaboration must be attached in the appendix section of the RFA.

Eligible Organizations/Entities

Not-for-profit, for-profit health and support service providers may apply including community-based organizations and government-operated health facilities that are located and provide services in the District of Columbia but not individuals.



Source of Grant Funding

Funds are made available through the HIV/AIDS Bureau, Health Resources and Services Administration (HRSA), US Department of Health and Human Services (HHS) to the District of Columbia, Department of Health, and HIV/AIDS Administration (HAA).

HAA has also designated District of Columbia appropriated dollars and funding under the Housing Opportunities for Persons with AIDS (HOPWA) Program to support program services. HOPWA is a federal formula grant from the U.S. Department of Housing and Urban Development.

Award Period

The grant awards will be for an initial period not to exceed one (1) year from the date of the award. Upon satisfactory performance of activities during the first year, the grant may be extended for an additional one-year period.

Grant Awards and Amounts

Ryan White Title II: \$2,000,000.00
Housing: HOPWA: \$1,725,000.00

Multiple Submissions

Applicants desiring consideration to provide programs and services under more than one program area **must submit a separate application for each program**. Each application must be self-contained and include all of the required information (**including a separate budget**) as outlined in the application submission format on page 55 of the RFA.

Contact Person

For further information, please contact:

Aurora L. Delespin-Jones
Office of Research and Analysis
441 4th Street, NW, Room 400 South
Washington, DC 20001
Phone (202) 727-7775
Fax (202) 727-9010
Website: www.cfo.dc.gov



Internet

Applicants who obtained this RFA through the Internet shall provide the Office of Research and Analysis (ORA) with the following:

- Name of organization;
- Key contact;
- Mailing address; and
- Telephone and fax numbers.

This information shall be provided so that the applicant can receive updates and/or addenda to the FY 2002-2003 Ryan White Title II and Housing Support Services RFA.

Pre-Application Conference

The Pre-Application Conference will be held August 13, 2002, from 1:00 p.m. to 3:00 p.m., at OCFO Training Room- A 941 North Capitol Street, NE, Washington, DC, 20002.

Explanations to Prospective Applicants

Applicants are encouraged to call, mail or fax their questions to the contact person listed above on or before August 26, 2002. Questions submitted after the deadline date will not receive responses. Please allow ample time for mail to be received prior to the deadline date.

Applicant Staff Requirements

1. The applicant shall employ qualified staff and maintain documentation that staff possesses adequate training and competence to perform the duties that they have been assigned.
2. The applicant shall maintain complete written job descriptions covering all positions and maintain descriptions in the project files and must be available for inspection upon request. The job description should include education, experience, and/or licensing/certification criteria, a description of duties and responsibilities, hours of work, salary range, and performance evaluation criteria.
3. The applicant shall maintain an individual personnel file for each project staff member that contains the application for employment, professional and personal references, applicable credentials/certifications, records of required medical examinations, personnel actions including time records and documentation of all training received. The file should also contain notation of any allegations of professional or other misconduct, the applicant's action with respect to the allegations and date and reason for termination, if any. Personnel files shall be available to the Grant Administrator upon request.



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4. The applicant shall provide orientation sessions for staff members with respect to administrative procedures, program goals and policies and practices. The applicant should identify a person to serve as an ombudsman/liaison to the Persons With Aids (PWA) advocacy and referral system.
 5. The applicant shall provide evidence of continuing education opportunities of new developments regarding the provision of HIV/AIDS health care and support services (i.e., treatment modalities, changes in target populations).
 6. The applicant shall maintain a current organizational chart that displays organizational relationships and demonstrates responsibility for administrative oversight and clinical supervision.
 7. The applicant shall obtain advance approval in writing from the Grant Administrator on any changes in staffing patterns or job descriptions.
 8. The applicant shall indicate when there are vacant positions or new positions for which there are no staff resumes available.
 9. The applicant shall ensure that personnel files contain a signed confidentiality form.

Facility Requirements

1. Regulations

The applicant's facilities shall meet all applicable federal, state, and local regulations for their intended use. The applicant shall maintain current all required permits and licenses for the facilities. Failure to do so constitutes a failure to adhere to the terms and conditions of the grant award and shall be a basis for termination.

2. Emergency Back Up Site

The applicant shall assure that an emergency site facility has been identified should the primary facility become unavailable for use as a result of a catastrophic event.

3. Handicapped Access

All facilities offered for the provision of services shall be accessible to persons with mobility limitations, consistent with the Rehabilitation of the Handicapped Act, PL 95-602 (Section 504), and the Americans with Disabilities Act, PL 101-336.



4. Maintenance

The applicant shall provide for operation of the facility, such as security, janitorial services, or trash pick-up and other supplies and services routinely needed for maintenance.

Performance Standards and Quality Assurance

1. The applicant shall have continuous quality improvement systems in place to monitor and evaluate the delivery of services, and to ensure that identified deficiencies are addressed. At a minimum, the quality assurance program may include a review of the appropriateness, quality and timeliness of the delivery of each service and should incorporate those quality assurance standards as have been approved by the Metropolitan Washington Regional HIV Health Services Planning Council; U.S. Department of Health and Human Services, Health Resources and Services Administration or Public Health Service; and/or the District of Columbia Department of Health.
2. The applicant shall develop and implement policies and procedures to evaluate the accuracy of data collection and reporting activities in accordance with protocols established by the Metropolitan Washington Regional HIV Health Services Planning Council; Department of Health and Human Services, Health Resources and Services Administration Public Health Service; and/or the District of Columbia Department of Health.

Applicant's Reporting Requirements

1. The successful applicants will be required to submit monthly reports by the fifth business day to the Grant Administrator to determine progress towards completion of task requirements. The reports should contain the following information in a format approved by the Grant Administrator:
 - a. Total number of persons current on rolls;
 - b. Types of services, activities and the number of persons involved in each;
 - c. Total number of admissions and terminations from service during the month; and
 - d. The status of the work plan, indicating the extent to which established milestones for the reporting month have been accomplished, and identify proposed revisions to the work plan to address problem areas.
2. The applicant should include a summary of the results of the evaluation of services under the quality assurance program.



3. The applicant should collect and report data in accordance with HRSA's mandatory Annual Administrative Report (AAR)¹.
4. The applicant should provide a copy of financial reports covering the period for which reimbursement is being requested. Payment request will be based on invoices with supporting documentation.
5. The successful applicants will be required to submit a final report no later than the 30th day after expiration of the grant summarizing all service delivery data, accomplishments, issues and recommendations.
6. The applicant is required to provide an unusual incidents report within 24 hours of the event and in writing within five (5) days after occurrence.²

Records

1. The applicant shall keep accurate records of activities of the project. When delivering services to clients, the applicant shall maintain records reflecting initial and periodic assessments, if appropriate; initial and periodic service plans; and the ongoing progress of each client. The applicant shall maintain confidentiality of client records. The applicant shall obtain written informed consent from the client that permits sharing or releasing the client's records in order to coordinate or verify services. A release of information form must be maintained in the client's record.
2. The applicant shall provide the Grant Administrator, and other authorized representatives of the Department of Health, such access to clinical records as may be necessary for monitoring and evaluation purposes. To ensure confidentiality and security, clients' records shall be kept in a locked file controlled by appropriate staff.

¹ This is an aggregate report requesting information about the applicant, unduplicated number of clients served, summary socio-demographics of clients (age, gender, race/ethnicity, exposure category, illness stage), number of service units for selected service areas (medical care visits, dental visits, mental health visits, substance abuse visits, and rehabilitation services), number of case management encounters, number of visits for home health care, and number of clients that received other specific services.

² An unusual incident is an event that affects staff or clients that is significantly different from the regular routine or established procedures. Examples include, but are not limited to, unusual death; injury; unexplained absence of a client from a residence or program; physical, sexual, or verbal abuse of a client by staff or other clients; staff negligence, fire, theft, destruction of property, or sudden serious problems in the physical plant; complaints from families or visitors of clients; requests for information from the press, attorneys, or government officials outside the jurisdiction involved with the grant; and client behavior requiring the attention of staff not usually involved in their care.



Monitoring

1. The Grant Administrator shall monitor and evaluate the performance of the applicant according to the program scope and related service delivery standards; and
2. The Grant Administrator shall assign a staff person to monitor the project. The Project Monitor shall review all written policies and procedures applicable to the project, review all monthly reports, conduct site inspections and hold periodic conferences with the applicant to assess the applicant's performance in meeting the requirements of the grant.

Evaluation

The Grant Administrator shall be authorized to assess the applicant's performance with respect to accomplishing the purposes of the grant. The Grant Administrator will work with the applicant to determine appropriate program and performance measures. The applicant's performance shall be assessed to determine the quality of the services delivered and the applicant's ability to deliver services according to the deadlines established in the grant agreement. Participation in client satisfaction surveys shall be part of the evaluation of program accomplishments.





SECTION II SUBMISSION OF APPLICATIONS

Application Identification

A total of six (6) applications are to be submitted in an envelope or package. Attachment A should be affixed to the outside of the envelope or package. **Of the six (6) copies, one (1) copy must be an original. ORA will not forward the application to the review panel if the applicant fails to submit the required six (6) copies.** Telephonic, telegraphic and facsimile submissions **will not be accepted**.

Application Submission Date and Time

Applications are due no later than 5:00 p.m., on September 6, 2002. All applications will be recorded upon receipt. Applications **submitted at or after 5:01 p.m.,** September 6, 2002 will not be forwarded to the review panel. Any additions or deletions to an application will not be accepted after the deadline.

The six (6) applications **must be** delivered to the following location:

Office of Research and Analysis
441 4th Street, NW, 400 South
Washington, DC 20001
Attention: Ms. Aurora L. Delespin-Jones

Mail/Courier/Messenger Delivery

Applications that are mailed or delivered by Messenger/Courier services **must be** sent in sufficient time to be received by the deadline at the above locations. Messenger/Courier services delivering applications at or after the post dated time **will not be accepted**.

***** Late Applications Will Not Be Forwarded To The Review Panel*****

As a result of the tragedy on September 11, 2001, building management has implemented New Security Procedures for the delivery of applications to our office. Please follow the procedures below to ensure that your applications are delivered to ORA efficiently and on time. Applicants should allow at least one-hour **before the 5:00pm deadline to clear the security checkpoints. ORA will not be held responsible for applications that are not received as a result of noncompliance to these new security delivery procedures.**

1. Enter through the rear of the building at the loading dock.
2. Mailroom Security will screen application packages
3. The applicant will be escorted to Suite 400 South.
4. ORA Staff will accept and sign for application packages.



SECTION III PROGRAM AND ADMINISTRATIVE REQUIREMENTS

Use of Funds

Applicants shall only use grant funds to support HIV care services. These funds cannot be used to provide direct financial assistance to individuals with HIV disease or to fund education and training.

Indirect Cost

Applicants' budget submissions must adhere to a ten-percent (10%) maximum for indirect costs for FY 2002-2003 Ryan White Title II grant funds and seven percent (7%) maximum for indirect costs for Housing Support Services funds. All proposed costs must reflect as either a direct charge to specific budget line items, or as an indirect cost.

Certifications and Assurances

Applicants shall complete and return the Certifications and Assurances listed in Attachments B and C with the application submissions. Applicants must include a copy of their internal client grievance procedures in the Assurance package.

SECTION IV GENERAL PROVISIONS

Insurance

The applicant when requested shall show proof of all insurance coverage required by law. All applicants that receive awards under this RFA must show proof of insurance prior to receiving funds.

Audits

At any time or times before final payment and three (3) years thereafter, the District may have the applicant's expenditure statements and source documentation audited.

Nondiscrimination in the Delivery of Services

In accordance with Title VI of the Civil Rights Act of 1964 (Public Law 88-352), as amended, no person shall, on the grounds of race, color, religion, nationality, sex, or political opinion, be denied the benefits of, or be subjected to discrimination under, any program activity receiving FY 2002-2003 Ryan White Title II and Housing Support Services for Persons with HIV/AIDS grant funds.



SECTION V APPLICATION FORMAT

Applicants are required to follow the format below and each application must contain the following information:

- Applicant Profile (**See Attachment A**)
- Table of Contents
- Program Descriptive Narrative (**Not to exceed 15 pages**)
- Program Evaluation (**Not to exceed 5 pages**)
- Program Budget, Budget Narrative (**Not counted in page total, See Attachment E**)
- Certifications and Assurances (**Not counted in page total, See Attachment B & C**)
- Appendices (Proof of Collaboration and one other attachment) (**Not counted in page total but not to exceed two attachments**)

The number of pages designated for each section is a recommendation. Applicants should feel free to submit fewer or more pages than recommended. However, the maximum number of pages for the total application **cannot exceed 20 double-spaced pages, on one side, on 8½ by 11-inch paper**. Margins must be no less than one inch and a font size of 12-point is required (New Times Roman or Courier type recommended). Pages shall be numbered. **The review panel shall not review applications that do not conform to these requirements.**

Description of Application Sections

The purpose and content of each section is described below. Applicants should include all information needed to adequately describe their objectives and plans for services. It is important that applications reflect continuity among the goals and objectives, program design, work plan of activities, and that the budget demonstrates the level of effort required for the proposed services.

Applicant Profile

Each application shall include an Applicant Profile, which identifies the applicant, type of organization, program area and the amount of grant funds requested. See Attachment A.

Table of Contents

The Table of Contents should list major sections of the application with quick reference page indexing.



Program Descriptive Narrative

This section of the application should contain a brief summary and that serve as the cornerstone of the application. The summary should highlight the primary objectives that are discussed in depth in other sections of the application.

This section should also contain goals and objectives, the description of activities that justifies and describes the program to be implemented.

Evaluation

This section of the application should describe the evaluation process that will be established to monitor and evaluate the specific program. The applicant is responsible for providing information as it relates to each proposed service area. Both qualitative and quantitative evaluation methodologies should be carried out.

Program Budget and Budget Narrative

Standard budget forms are provided in Attachment E. The budget for this application shall contain detailed, itemized cost information that shows personnel and other direct and indirect costs. The detailed budget narrative shall contain a justification for each category listed in the budget. The narrative should clearly state how the applicant arrived at the budget figures.

Personnel

Salaries and wages for full and part-time project staff should be calculated in the budget section of the grant application. If staff members are being paid from another source of funds, their time on the project should be referred to as donated services (i.e., in-kind, local share and applicant share). Applicants should include any matching requirements, either case or in-kind.

Nonpersonnel

These costs generally include expenditures for space, rented or donated, and should be comparable to prevailing rents in the surrounding geographic area. Applicants should also add in the cost of utilities and telephone services directly related to grant activities, maintenance services (if essential to the program) and insurance on the facility.

Costs for the rental, lease and purchase of equipment should be included, listing office equipment, desks, copying machines, word processors, etc. Cost for supplies such as paper, stationery, pens, computer diskettes, publications, subscriptions and postage should also be estimated.



All transportation-related expenditures should be included, estimates on staff travel, pre-approved per diem rates, ground transportation, consultant travel costs, employee reimbursement and so forth.

Indirect Costs

Indirect costs are cost that are not readily identifiable with a particular project or activity but are required for operating the organization and conducting the grant-related activities it performs. Indirect costs encompass expenditures for operation and maintenance of building and equipment, depreciation, administrative salaries, general telephone services and general travel and supplies.

Certifications and Assurances

Applicants shall provide the information requested in Attachments B and C and return them with the application. Applicants must include a copy of their internal client grievance procedures in the Assurance package.

Appendices

This section shall be used to provide technical material, supporting documentation and endorsements. Such items must include (1) Proof of Collaborations (Memorandum of Understanding (MOU), letters of commitment and/or partnership) and (2) One other attachment deemed to be of significant relevance to the program area.



SECTION VI RYAN WHITE TITLE II

General Purpose

The purpose of Title II “The Ryan White Comprehensive AIDS Resources Emergency (CARE) Act of 1990 and Amendments of 1996” is to improve the quality, availability and organization of health care and support services for individuals living with HIV disease and their families in the United States and its Territories.

The Ryan White CARE Act is intended to help communities and states increase the availability of primary health care and support services in order to:

1. Reduce the utilization of more costly inpatient care,
2. Increase access to care for underserved populations; and
3. Improve the quality of life of those affected by the epidemic.

Target Population

The target populations are African American gay and bisexual men; Latinos/as, including gay and bisexual men; women; women with children; transgender persons; substance abusers; ex-offenders; people who are homeless, and people living in under served geographic areas. Special consideration will be given to providers whose staff include bilingual professional and demonstrate competence in working with cultural minorities.

Applicants shall provide services for uninsured and under insured people with HIV/AIDS.

Grant Awards and Amounts

Approximately \$2,000,000.00 is available under the Ryan White Title II grant program. Grant awards will be made in the following amounts under each program area:

- | | |
|--|-----------|
| ▪ Community Based Organization Demonstration Project | \$500,000 |
| ▪ Comprehensive HIV/AIDS Project for Incarcerated Persons and Ex-Offenders | \$600,000 |
| ▪ Comprehensive Health Care for Women in the District of Columbia | \$600,000 |
| ▪ Professional Home Health Care | \$150,000 |
| ▪ Outreach and Referral Services Demonstration Project | \$150,000 |



PROGRAM AREA 1 COMMUNITY BASED ORGANIZATION (CBO) DEMONSTRATION PROJECT

The purpose of the CBO Demonstration Project is to further support and develop community-based organizations that propose innovative, creative, nontraditional programs for service delivery to persons living with HIV/AIDS. The program can make use of Early Intervention Strategies (EIS) that go beyond the normal scope of prevention interventions, innovative health solutions, support services which enhance the clients quality of life, nontraditional mechanisms for the retention of clients and adherence to treatment protocols, etc.

HAA is particularly interested in the provision of services that target underrepresented demographics, e.g., women, women with children, youth in high-risk situations, homeless individuals, injecting drug users (IDUs) not in treatment, male and female sex workers, street youth, non-gay-identified men who have sex with men, school-based education efforts for youth, and capacity building for the expansion of the HIV/AIDS public health infrastructure of community-based organizations.

Persons at risk for HIV infection and persons with HIV/AIDS infection should play a key role in identifying EIS and health care components not adequately met by existing programs. Priority setting accomplished through a participatory process will result in programs that are responsive to high priority, community-validated needs within defined populations.

Available Funding

Approximately \$500,000 is available to fund 3-6 projects under this Program Area. Successful applicants will be allocated \$75,000 - \$100,000 per award.

Applicant Responsibilities

1. The applicant is responsible for developing a demonstration project, which shall include a “process evaluation” by providing documentation during program implementation for making adjustments for improvement of the program (i.e., questionnaire, focus groups, etc.).
2. The applicant is responsible for developing a demonstration project, that shall conclude with an “outcome evaluation” to determine whether the program met the stated goals and objectives (i.e., continuity of care, improvement in quality of life, etc.).
3. The applicant is responsible for ensuring that the project emphasis is culturally and linguistically appropriate.
4. The applicant is responsible for developing measurable goals and objectives, ensuring that the intended outcome can be drawn from the intervention.



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5. The applicant is responsible for ensuring that the proposed projects are cost effective and demonstrate the ability to meet the stated goals and objectives.
 6. The applicant is responsible for ensuring that the program meets the needs and desires of the target community.

Evaluation

As this is a demonstration program, all applications are required to have an evaluation component of high quality consistent with the scope of the proposed project and funding. The applicant shall provide the following information as it relates to each proposed service area:

- a. Provide a plan of how to evaluate the accomplishments of the proposed service area;
- b. Describe how the data will be gathered;
- c. Explain/describe data collection instruments to be used;
- d. Describe the process of data analysis; and
- e. Demonstrate how the evaluation will be used for program improvements.

Applicants are required to expend at least five percent (5%) but not more than ten percent (10%) of the awarded funds received on evaluation of the project.



PROGRAM AREA 2 COMPREHENSIVE HIV/AIDS PROJECT FOR INCARCERATED PERSONS AND EX-OFFENDERS

The District of Columbia's HIV/AIDS Administration (HAA) is seeking vendors (herein referred to as **applicants**) to provide HIV/AIDS services to incarcerated and recently released male and female inmates within the District of Columbia corrections system. Approximately 17,500 inmates enter the DC Department of Corrections (DOC) annually. Of that number, it is estimated 10% could possibly have HIV/AIDS. It is important to note of the 17,500 inmates that enter the DOC annually, 600-700 are female of which as many as 90 could possibly be infected with HIV.

Additionally, because of the relatively high number of inmates who have a history of substance abuse the risk for HIV infection in the jail and prison settings is high. Therefore, HAA agency will seek to fund applicants to deliver HIV/AIDS programs/services, designed specifically to address the needs of HIV-infected and at-risk male and female inmates in the DOC system.

In order to address the **unique** and specific **needs** of female HIV-positive inmates, HAA encourages applicants to propose strategies that address this demographic group. Therefore, applicants are encouraged to create programs that are **gender-specific to HIV-positive and at-risk female** inmates, and releases living in community-based corrections facilities (e.g., halfway houses).

Available Funding

Approximately \$600,000 is available in this Program Area.

Program Expectations

Component #1 Transitional Case Management (Discharge Planning) for HIV-Infected Inmates

The selected applicant shall deliver Transitional Case Management services (also known as discharge planning) for HIV-infected inmates within all facilities in the DOC system, including all community-based corrections facilities (e.g., halfway- houses). The applicant shall ensure that HIV-infected inmates leaving the correctional system are referred to necessary services once they return to the community. The applicant shall link the newly released ex-offender living with HIV/AIDS to the following essential community-based services:

- (1) Medical care, including female specific (e.g., gynecological illnesses), with emphasis on HIV-related care and access to appropriate anti-retroviral therapies;
- (2) Substance abuse treatment;
- (3) Mental health, domestic violence and supportive counseling;
- (4) Housing referrals;
- (5) Emergency financial assistance;



(6) Other entitlements (e.g., Temporary Assistance to Needy Families, Social Security and Medicaid, etc), and;

(7) AIDS Drug Assistance Program (ADAP) referrals.

Component #2 Comprehensive HIV/AIDS Prevention and Education Services

The selected applicant shall deliver HIV-prevention education, including risk reduction training and behavior-based interventions, to inmates in all facilities within the DOC system.

Additionally, inmates should be provided with information about accessing HIV counseling and testing services and additional HIV-related resources both inside and outside of the correctional facilities, including HIV counseling and testing. Dissemination of information **should** be culturally and linguistically appropriate.

Component #3 PWA/Support Groups

The applicant shall provide HIV/AIDS gender-specific education and support groups for male and female inmates living with HIV/AIDS (PWA). These focus groups shall target both incarcerated and community-based inmates who are at-risk for HIV infection and those who are already infected. It is anticipated that the ex-offender led support groups will provide supportive environment and prevention education risk-reduction information to promote behavior modification and maintenance of behavior change. HAA encourages applications from community-based organizations that have ex-offenders and PWA ex-offenders on staff that can deliver this service.

Multiple Submissions

Applications may be submitted for one or all of these components. **A separate application is required for each of the components.** The applicant(s) funded will be expected to closely coordinate activities with the District of Columbia HIV/AIDS Administration, Federal Bureau of Prisons (BOP), and the D.C. Department of Corrections (DOC).

Specific Services

Specific services refer to (1) services that shall be conducted by the Applicant(s) that is awarded under this RFA and/or (2) information that is to be provided in the applicant's application. The Applicant(s) shall demonstrate its ability to conduct the specific services described, following the application format specified.



Component #1: Transitional Case Management (Discharge Planning)

Applicant Responsibilities

Organizational Capacity

The applicant is responsible for describing its capacity to provide transitional case management for people with HIV/AIDS within correctional settings, including the following:

- Mission;
- Funding sources;
- Organizational structure (i.e., staff, volunteers, administrative/financial mechanisms);
- Experience addressing the case management needs of HIV-infected individuals (e.g., medical follow-up including medications, financial assistance, housing, drug treatment referral, mental health and supportive counseling) including any specific experience addressing transitional case management needs of incarcerated individuals and case management needs of various sub-populations (e.g., substance abusers, lesbians);
- Experience working within various correctional settings (prisons, halfway houses, juvenile facilities); and
- Experience coordinating activities with administrators and staff within correctional settings; experience providing referral services, particularly for HIV-related services needs, housing, substance abuse, entitlement, and other supportive services.

Knowledge of Service Needs of HIV infected Inmates

The applicant is responsible for demonstrating an understanding of the service needs of HIV-infected inmates and the role of the transitional case management process. Information shall be provided that indicates an understanding of the needs of HIV-infected inmates prior to release, upon release, and post-release; understand the variation in service needs of HIV-infected female inmates incarcerated short-term versus long-term; variation in service needs of clients depending on characteristics of their HIV disease; and the specific needs of various sub-populations among inmates (i.e., substance abusers, mothers, same sex partners).

Assessment of Needed Services

The applicant is responsible for describing what method(s) it will use to assess the adequacy of existing transitional case management services and determine unmet needs. Methods may include: survey of service providers, interviews with service providers and/or staff, interviews with former inmates infected with HIV, and review of HAA planning documents related to discharge planning for incarcerated persons and recently released ex-offenders.



Delivery of Transitional Case Management Services

The applicant is responsible for arranging/referring HIV-infected inmates to needed services to ensure that they enter stable environments upon release. The applicant is responsible for describing the process for providing transitional case management services, and addressing the following areas:

- ❑ **Availability of Services:** The applicant is responsible for demonstrating: knowledge of resources for HIV-infected individuals within the community; a familiarity with processes to apply for and obtain necessary services; and an ability to negotiate formal referral agreements. The applicant shall describe its experience in securing services for clients and dealing with bureaucratic barriers such as waiting lists and limited space.
- ❑ **Pre-release:** The applicant is responsible for describing key activities involved in providing pre-release services. In particular, describe pre-release activities conducted with the following time frames: pre-release services for inmates incarcerated for longer time periods shall be provided over a three to six month period prior to release; pre-release services for individuals incarcerated for shorter time periods (e.g., 1-2 months) shall be provided approximately two weeks prior to release. Pre-release activities will include, at a minimum the following:
 1. **Assessment of Client Needs:** The applicant is responsible for describing processes for assessing needs of clients. In conducting such assessments, the applicant shall work with appropriate correctional staff, appropriate staff, essential community-based resources, and members of client families (when requested by clients, incorporating the needs of families and their role in providing services/housing within the overall discharge plan). The applicant shall describe experience working with specific sub-populations among the inmate population including female, substance abusers, mothers, and pregnant females.
 2. **Discharge Plans:** The applicant is responsible for describing how it will create a complete discharge plan for each client, including any mechanisms for classifying the service needs of clients. For example, a discharge plan may address access/referrals to the following services: medical care, including medications; arranging for the transfer of inmate medical records to the receiving community-based programs; housing; substance abuse treatment; food; clothing; processing of preliminary entitlement applications; and referrals to supportive counseling (e.g., domestic violence).
 3. **Post-Discharge Tracking and Monitoring:** The applicant is responsible for describing processes for maintaining client records and tracking referrals to ensure that individuals enter a stable environment upon release. Post-release assistance shall typically be provided for up to a minimum of six months. Also, establish a process that will determine if clients are accessing services and, also, conduct needed follow-up assistance. Information of disposition of discharge planning clients shall be provided to HAA on a monthly basis during the program year.



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- ❑ **Evaluation:** The applicant is responsible for describing the evaluation processes that will be established to monitor and evaluate transitional case management services. Both qualitative and quantitative evaluation methodologies should be carried out. Special emphasis should be placed on the tracking of inmates after release to ensure that services are accessed and needs are met.
 - ❑ **Coordination with HIV prevention Education Services and PWA Support Groups:** The applicant is responsible for describing how transitional case management services will be coordinated with HIV prevention services and PWA support services in the corrections system to ensure that both correctional staff and inmates are aware of the availability of transitional case management services.
 - ❑ **Management and Staffing:** The applicant is responsible for describing its management and staffing plan, including administrative staff, case managers, support staff and consultants. In particular, provide a description of staff skills and experience in providing transitional case management services to HIV-infected inmates, responsibilities of staff, and an explanation of how staff will be managed and services coordinated. The applicant shall also describe the experience of staff in working with the specific target populations, training to be provided to staff, and strategies to prevent staff attrition. Also, describe the involvement, where applicable, of any outside agency/staff/consultants in transitional case management services. A Discharge Planner hired as part of this action will be assigned to the DOC Case Management office to work directly under the supervision of the Chief/Director of Case Management Services.
 - ❑ **Coordination:** The applicant is responsible for describing how activities will be coordinated in a number of areas. This includes: (1) collaboration with HAA and the DOC in terms of implementing and managing the program within all facilities; (2) linkages (via Memorandum of Understanding) with other service providers, including organization with which the applicant has formal referral arrangements, with particular attention to describing what specific services will be provided by community agencies and how staff at collaborating agencies will be provided training on the needs of the target population and how to provide services in a culturally-sensitive manner; and networking with discharge planning activities in other jurisdictions in the country to identify program innovations, success and other strategies to enhance the program.
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Component #2: Comprehensive HIV/AIDS Prevention and Education Services

Applicants Responsibilities

Organizational Capacity The applicant is responsible for describing its capacity to provide HIV/AIDS prevention services within correctional settings, including the following:

- Mission;
- Funding sources;
- Organization structure (i.e., staff, volunteers, administrative/financial mechanisms);
- Experience providing HIV prevention services;
- Knowledge and experience addressing HIV prevention needs of various sub-populations (e.g., females, drug users, HIV positive individuals);
- Experience working within various correctional settings (prisons, halfway houses) and coordinating activities with administrators and staff within these facilities;
- Knowledge of and/or experience providing HIV prevention for inmates; and
- Experience providing information and referrals to HIV counseling and testing services and coordination of HIV testing services within DOC and Federal Bureau of Prison's facilities.

Knowledge of HIV Prevention and Education Needs

The applicant is responsible for demonstrating its knowledge of existing HIV prevention efforts within the DOC system and an understanding of the HIV prevention needs of male and female inmates.

Scope of proposed HIV prevention intervention strategies

The applicant is responsible for describing strategies for conducting HIV prevention education services for incarcerated persons within the criminal justice system. Information and specific target populations shall include: training in addressing HIV-related issues with correctional settings including confidentiality:

- Sensitivity issues;
- Dissemination of basic information on HIV/AIDS;
- Risk-reduction education and behavior-based interventions; through discussion of HIV testing process, coordination with HIV testing services within the facilities and referral to testing services in the community that inmates can access upon release;



- Identification of additional resources both inside and outside the facility;
- Provide dental dams, condoms, and female condoms, where appropriate, during training and workshops; and
- In collaboration, the ex-offender educators will train inmate peer educators.

Understanding of HIV Prevention Models

The applicant is responsible for describing educational method(s) to be used with specific target populations and in specific settings. Different approaches may be used in the various settings or with distinct target populations. Possible educational methods might include, but are not limited to: single educational sessions; series of educational sessions; support groups; ex-offender-led education; dissemination of materials; and videos. For the proposed educational method(s) the applicant shall provide the theoretical framework and or rationale for the selection of the method(s), a description of how the method(s) will be implemented with special attention to the restrictions of carrying out activities in correctional facilities and settings, and estimate the number of inmates the applicant will reach during the project period. If materials will be developed for the program, the applicant shall describe how they will be developed, by whom and why existing materials are inappropriate for this intervention.

The applicant shall indicate how its prevention efforts will support/relate to HIV counseling and testing services within correctional facilities. This may include processes for referring inmates who test HIV positive to transitional case management services as appropriate and providing additional training in HIV counseling to correctional facility staff. In addition, describe how information will be provided on HIV counseling and testing services accessible to inmates upon release from the correctional facility.

Coordination

The applicant is responsible for describing how activities will be coordinated in a number of areas. Coordination with HAA, BOP and the DOC, in terms of implementing and managing HIV prevention services within all the facilities (with particular attention to collaboration with HIV counseling and testing services); and **links other HIV/AIDS service providers within the community that may collaborate in the educational efforts or to which clients may be referred upon release.**

HIV Counseling and Testing

The applicant is responsible for providing HIV counseling and testing services on a voluntary and confidential basis to inmates. The services shall include:

1. Individual prevention counseling sessions and individual post-test counseling using CDC “HIV Counseling, Testing and Referral Standards and Guidelines,” dated May 1994;



2. Testing using the Orasure non-invasive HIV test for all participants who desire to be tested after prevention counseling sessions;
3. Patient-referred partner notification services to HIV-positive participants;
4. Referral of HIV-positive tested participants to discharge planning, primary medical services including assessment of the need for psycho-social and medical follow-up, and other HIV/AIDS service providers within the community to which inmates may be referred upon release; and
5. Documentation of client demographics, test results and post-test information by use of the CDC HIV Data Report Form or a similar system that can transfer information to the HIV/AIDS Administration.

Coordination with PWA HIV/AIDS Support Groups

The applicant is responsible for describing how HIV prevention services will be coordinated with PWA HIV support groups. As needed, the specific aspects of the coordination activity will be determined upon awarding of funds. The applicant must include PWA inmates and PWA ex-offenders in training components.

Coordination with Transitional Case Management (Discharge Planners)

The applicant is responsible for describing how HIV prevention services will be coordinated with transitional case management services to ensure that both correctional staff and inmates are aware of the availability of transitional case management services. The applicant shall describe how it plans to coordinate its services with the applicant providing transitional case management. **The specific aspects of coordination will be determined upon awarding of funds.**

Description of Organization Management Structure

The applicant is responsible for describing its management and staffing plan, including management, educators, support staff and consultants. In particular, provide a description of staff skills and experience in providing HIV prevention services, responsibilities of staff, and an explanation of how staff will be managed and coordinated. The applicant shall also describe the experience of staff, and strategies to minimize staff attrition. Also, describe the involvement, if any, of outside agencies/staff/consultants in prevention services.

Evaluation

The applicant is responsible for describing the evaluation processes that will be established to monitor and evaluate this component. Both qualitative and quantitative evaluation methodologies must be utilized. The applicant shall describe all evaluation instruments (e.g., forms) that will be used in the evaluation processes, including existing and agency created instruments.



Component #3: PWA Ex-offender HIV Support Group

Applicant Responsibilities

Organizational Capacity:

The applicant is responsible for describing its capacity to provide HIV/AIDS support groups facilitated by ex-offender peers within correctional settings to include the following:

- ☐ Mission;
- ☐ Funding sources;
- ☐ Organizational structure (i.e., staff, volunteers, administrative/financial mechanisms);
- ☐ Experience providing HIV prevention education and psycho/social services;
- ☐ Knowledge of and/or experience addressing HIV prevention education and psycho/social needs, and support groups for inmates (e.g., females, drug users, youth, HIV positive individuals);
- ☐ Experience working within various correctional settings (prisons, halfway houses, community-based corrections) and coordinating activities with administrators and staff within these facilities; and
- ☐ Methodology for training peer educators to work in correctional settings.

Knowledge of Prevention Education and PWA Support Group Needs

The applicant is responsible for demonstrating knowledge of existing HIV education prevention and support groups within the DOC system, and an understanding of the HIV support group needs of inmates with HIV/AIDS. An HIV/AIDS education/prevention module appropriate for the population targeted for services will be utilized as guidance in the provision of these services.

Assessment of PWA Support Group Needs

The applicant is responsible for describing what methods will be used to assess existing support groups and HIV prevention efforts and determine the needs of the target population and sub-populations. The applicant will also assess the various settings (prisons, halfway houses, pre-trial detention, etc.) in order to determine appropriate PWA support group activities within these facilities. **This assessment will be carried out with the cooperation of the HIV/AIDS Administration of the District of Columbia and the District of Columbia Department of Corrections.**

Scope of Program and HIV Education Program Approaches

The applicant is responsible for describing strategies for conducting HIV support groups for incarcerated correctional facilities staff (including medical staff), and other staff within the



criminal justice system (e.g., parole officers). Information and specific target populations shall include:

Inmates/Staff

- ❑ Dissemination of basic information on HIV/AIDS;
- ❑ Risk reduction education and behavior-based interventions;
- ❑ Thorough discussion of HIV testing process, coordination with HIV testing services within facilities and referral to testing services in the community that inmates can access upon release; and
- ❑ Identification of additional resources both inside and outside the facility
 1. Mutual and social support
 2. Coping mechanisms
 3. Stress and grief management techniques
 4. Health maintenance information

PWA/HIV Support Groups shall provide information and education to include; basic facts on HIV and its transmission and treatment, risk reduction information, harm reduction strategies to include safer sex strategies, proper condom use, relapse prevention and initiation and maintenance of behavior change. Prevention education information shall be culturally and linguistically appropriate.

The applicant is responsible for describing HIV educational method(s) to be used with specific target populations and in specific settings. Different approaches may be used in the various settings or with distinct target populations. Possible psycho/social educational methods might include, but are not limited to: Single educational sessions; series of educational sessions; support groups; peer education; dissemination of materials; and videos. For the proposed psycho/social educational method(s) the applicant shall provide the rationale for the selection of the method(s), a description of how the method(s) will be implemented with special attention to the restrictions or carrying out activities in correctional facilities, and estimate the number of inmates the applicant will reach during the project period. If the applicant proposes to use a specific curriculum or materials, these should be described in the application and **copies attached to the application if available**. If materials will be developed for the program, the applicant shall describe who will develop them, and why existing materials are inappropriate.

Evaluation

The applicant shall describe evaluation processes that will be established to monitor and evaluate the HIV Psycho/Social Educational program. Both qualitative and quantitative evaluation methodologies should be carried out.



PROGRAM AREA 3 COMPREHENSIVE HEALTH CARE FOR WOMEN IN THE DISTRICT OF COLUMBIA

In the U.S., the groups of people likely to become infected with the HIV virus that causes AIDS have changed over past years. AIDS no longer affects primarily gay men, but is now a leading cause of premature death for American women. Approximately 20 percent of new AIDS cases are now women and – because infections of women continue to increase – among people newly diagnosed with the HIV virus, the percentage of women is even greater. Most women with HIV become infected through sexual contact and the women most likely to become infected are poor ethnic minority women. In fact, although only 21 percent of U.S. women are African American and Hispanic, approximately 77 percent of AIDS cases in women are from these minority groups.

Of new HIV infections among women in the United States, CDC estimates that approximately 75 percent of women were infected through heterosexual sex and 25 percent through injection drug use. Of newly infected women, approximately 64 percent are black, 18 percent are white, 18 percent are Hispanic, and a small percentage are members of other racial/ethnic groups.

HIV infection is now the third leading cause of death among women ages 25 to 44 and the leading cause of death among black women in this age group. In addition to conditions such as *Pneumocystis carinii* pneumonia that afflict HIV-infected people of both genders, women suffer gender-specific manifestations of HIV disease, such as recurrent vaginal yeast infections and pelvic inflammatory disease.

Women with HIV frequently have great difficulty accessing health care, and carry a large burden of caring for children and other family members who may also be HIV-infected. They often lack social support and face other challenges that may interfere with their ability to adhere to treatment regimens.

To confront the growing problem of HIV and AIDS in women in the District of Columbia, the HIV/AIDS Administration (HAA) is making women-focused initiatives an important component of its current funding opportunities.

Among the issues HAA seeks to address is the spread of HIV among female injection drug users and from them to their sexual partners and newborns in the District of Columbia. Based on AIDS case data through December 2001, the epidemic in the District continues to shift dramatically toward injection drug use (IDU). In the District of Columbia, as of December 2001, a full 25% of AIDS incidences by mode of transmission are directly attributable to IDU. (The national proportion of new IDU cases is 27%. Extrapolating from comparable national data, IDU is implicated in at least another 5% of the District's newly diagnosed AIDS cases (those resulting from heterosexual sex with an IDU), most of which are women-proportions that are also on the rise. And approximately 75% of newborns with HIV have a drug-injecting parent. Helping injectors to reduce other health compromises from drug injection (e.g., endocarditis, malnutrition, drug overdose, STD transmission); to better manage the social impacts of drug use (e.g., child neglect); to build health-behavior and help-seeking skills, including engaging in drug



treatment and prenatal care; and to gain knowledge of HIV serostatus and earlier treatment. These are the impacts that HAA seeks to effect.

The goal of this initiative is to improve the health status of women in the District of Columbia by increasing access to linked networks of health services, including HIV, substance abuse prevention treatment and care and primary medical services. Planning and developing a linked network between HIV, substance abuse programs and primary medical care facilities will accomplish this.

HAA is soliciting applications from qualified agencies to design and implement a comprehensive program of HIV/AIDS services to District of Columbia HIV-positive and at-risk for HIV female residents. The successful applicant will oversee and coordinate an array of providers who will collaborate to deliver supportive services to indigent, uninsured and underinsured females living in the District of Columbia.

Expectations

Applicants who are funded will be expected to closely coordinate activities with other funded community-based organizations in the District of Columbia. The multi-component structure of this initiative requires that applicants strongly illustrate the capacity to forge collaborations with other applicants under this program.

Available Funding

A total of \$600,000 is available to support services in this Program Area to support 3-5 grants.

Areas of Services

1. Case Management Services for Women.

Applicant Responsibilities

- a. The applicant is responsible for complying with the District of Columbia Case Management Quality Assurance Program Protocol;
- b. The applicant is responsible for describing “gender specific” approach to Case Management;
- c. Special consideration will be given to applicants proposing non-traditional; hours of operation to further address the unique needs of District women;
- d. The applicant is responsible for providing Case Management Services that coordinate primary medical, psychosocial, and support services;
- e. The applicants description of case management services shall include:
 - 1) A formal assessment of client needs;
 - 2) The development of an individualized plan for care management;
 - 3) The identification of appropriate sources of care;
 - 4) Referral for or the direct provision of services; and



5) Appropriate monitoring and follow-up.

- f. The applicant's case management services may include, but are not limited to: initial psycho social evaluations, assistance with entitlement and benefits, counseling and group support; on-going HIV/AIDS education, preliminary drug rehabilitation services, assistance with housing, patient advocacy; referrals to alcoholics/narcotics anonymous meetings, substance abuse counseling; AIDS Drug Assistance Program application and re-certification, volunteer work assignments, exercise sessions, and hobby and interest groups.

2. Early Intervention Strategies (EIS) for Women.

- a. Special consideration will be given to prevention strategies that attempt to bring into care District women with HIV/AIDS who are not currently receiving care;
- b. The applicant is responsible for demonstrating an ability to reach women in a variety of settings;
- c. The applicant must have a proven track record with promoting HIV/AIDS risk reduction; and
- d. The applicant is responsible for demonstrating ability to provide behavior-based interventions.

3. Substance Abuse Counseling for Women.

- a. The applicant is responsible for demonstrating the ability to provide substance abuse counseling for female District women living with HIV/AIDS, consisting of individual hours and group-person hours;
- b. The applicant is responsible for providing substance abuse counseling that is coordinated and delivered by Certified Addictions Counselors (CAC) or licensed mental health professionals with expertise in substance abuse; and
- c. The applicant must have experience providing at a minimum an initial interview, psychosocial assessment, and a treatment plan that outlines long-range goals, interventions for the client and an implementation schedule.

4. Mental Health Services for Women.

- a. The applicant is responsible for providing gender specific mental health services to District women consisting of individual hours, group person hours and individual assessments;
- b. The applicant is responsible for providing outpatient mental health services for people with HIV/AIDS that include but are not limited to, individuals with pre-existing or acute psychiatric problems, mental illness, significant substance abuse problems and care-givers and members of the support system of the dually and triply diagnosed clients;



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- c. The applicant is responsible for ensuring that all mental health services are provided by appropriately licensed and/or certified mental health professionals;
 - d. The applicant is responsible for providing mental health services in a manner that is culturally sensitive to racial, ethnic and sexual minorities; and
 - e. The applicant is responsible for conducting comprehensive mental health needs assessments and diagnostic screenings for all clients receiving services, which will take into consideration issues such as, chronic mental illness, and significant HIV/AIDS related mental health problems, including HIV dementia, HIV mania, and clinical depression.

5. Primary Medical Services for Women.

- a. The applicant is responsible for demonstrating an ability to provide coordinated, comprehensive, primary outpatient medical care services to District women;
- b. The applicant is responsible for demonstrating an ability to provide Medical Services to women at all stages of HIV disease;
- c. The applicant is responsible for ensuring that outpatient medical services must include ambulatory care visits and laboratory tests;
- d. The applicant is responsible for providing female clients with pelvic examinations, pap smears, and pregnancy test, as well as screening tests for venereal diseases and vaginal infections;
- e. A sub-specialty visit refers to consultations with specialists. The applicant is responsible for referring clients to a specialist when necessary; and
- f. Special consideration will be given to applicant proposing non-traditional clinic hours to fit the needs of workingwomen.

Organizational and Program Requirements

For each of the proposed services, the applicant is responsible for demonstrating collaborative efforts among other the community-based providers in the District of Columbia, timely provision of services and mechanism to report progress, achievements and barriers in the delivery system as well as the use of funds in achieving the objectives of the program.

The applicant is responsible for addressing each of the following requirements emphasizing all information relating to the provision of HIV-related services to HIV-positive and at-risk females living in the District of Columbia.



1. Qualifications of Your Organization

The applicant is responsible for describing its qualifications as it relates to each proposed service area:

- a. Describe briefly the mission of your organization.
- b. Organization's goals and objectives.
- c. Organization's current programs and activities.
- d. Organization's current clients/targets.
- e. Brief descriptive evidence of organization's accomplishments.
- f. Provide information to support the organization's qualifications to successfully accomplish the proposed program's objectives.
- g. Describe qualifications of key staff.
- h. Describe logically the need for the proposed services.

2. Goals and Objectives of Proposed Services

The applicant is responsible for providing the following information as relates to each proposed service area:

- a. Provide objectives that are measurable and quantifiable (if possible).
- b. Clearly describe the proposed program activities.
- c. Describe the location of proposed services.
- d. Describe the qualifications of staff assigned to the proposed program.
- e. Present reasonable timeline and resources to accomplish the scope of the proposed activities.

3. Evaluation

The applicant is responsible for providing the following information as it relates to each proposed service area:

- a. Provide a plan of how to evaluate the accomplishments of the proposed service area;
- b. Describe how the data will be gathered;
- c. Explain/describe data collection instruments to be used;
- d. Describe the process of data analysis; and
- e. Demonstrate how the evaluation will be used for program improvements.



PROGRAM AREA 4 PROFESSIONAL HOME HEALTH CARE

The HIV/AIDS Administration is seeking applicants for the creation and implementation of a Professional Home Health Care program. The purpose of the solicitation is to provide home health care services to People Living With HIV/AIDS (PWA) and who are eligible for Professional Home Health Care if they have proof of HIV status from a physician licensed in the District of Columbia.

Professional Home Health Services are designed for ambulatory patients with non-acute conditions related to HIV disease who are unable to receive outpatient primary medical care, but do not require hospital or nursing home placement Services:

- a. Maintain HIV infected persons in the community utilizing home health care, rehabilitation services, and attendant care/personal care;
- b. Ensure a continuum of care for HIV infected persons by providing a comprehensive array of skilled, therapeutic, palliative, and rehabilitative services in the home and demonstrate linkages with HIV primary care providers; and
- c. Ensure a continuum of care for HIV/AIDS clients by requiring applicants (home health and other providers) to provide personal care that may include 24-hour attendant care as needed and demonstrate linkages with skilled home care providers.

Home health care providers shall be able to offer the following range of services: home health aide and personal/attendant care; routine and skilled nursing; rehabilitation and mental health; intravenous and aerosolized medication treatments; diagnostic testing; parental feedings, and other high tech services, prosthetics, devices and durable medical equipment used by clients in a home/residential setting (e.g., wheelchairs, inhalation therapy equipment or hospital beds and pharmaceuticals not covered by other reimbursement).

Applicants shall provide directly or through contract with another entity all the services listed above.

Available Funding

Approximately \$150,000 is available to fund 2-3 Home Health Care providers. Successful applicants will be awarded \$50,000-75,000 each.

Applicant Responsibilities

- 1. The applicant is responsible for describing how it will provide directly or through referral, culturally sensitive care and services, including bilingual and bicultural services, and how they will work with clients at the earliest stages of HIV infection, as well as those with end stage diagnosis of AIDS;
- 2. The applicant is responsible for providing physicians, nurses, nurse practitioners, physical therapists, occupation therapists, licensed medical social workers,



- nutritionists, and other para-professionals as required. Physicians, nurses, nurse practitioners, physical therapists, occupational therapist, licensed medical social workers and nutritionists must be licensed in the jurisdiction it proposes to service;
3. The applicant is responsible for demonstrating that it is licensed and certified to provide home health care in the jurisdiction that it proposes to serve. Copies of its current licenses must be included in the application;
 4. The applicant is responsible for providing professional home health care services, which include professional nursing services furnished in the client's home according to a written plan of care established by physicians licensed in the District of Columbia;
 5. Home health care services may include: provision of durable medical equipment and assistance in its use; diagnostic testing; physical, occupational, speech, and/or other rehabilitative therapies by a licensed certified professional as well as, the supervision of infusion and intravenous therapies; the administration of prescription drugs; supervision of certified home health and personal care aides; and the monitoring of individualized patient care plans;
 6. The applicant is responsible for ensuring that home health aides, who are certified, having completed an approved training program from an approved provider of training or an approved competency evaluation program, provide home health care services. Home health aides must be under the supervision of a registered nurse licensed in the District of Columbia;
 7. The applicant is responsible for ensuring that a registered nurse or a licensed practical nurse under overall supervision of a registered nurse in accordance with the federal and local laws and regulations shall provide all treatment and monitoring services;
 8. The applicant is responsible for reporting the numbers of clients served by illness stage;
 9. The applicant is responsible for selecting a staff member to attend monthly Home Health Care Advisory Committee Meetings; and
 10. The applicant must be willing to work with and establish a relationship with other care providers.

Evaluation

The applicant is responsible for providing the following information as it relates to each proposed service area:

- a. Provide a plan of how to evaluate the accomplishments of the proposed service area;
- b. Describe how the data will be gathered;
- c. Explain/describe data collection instruments to be used;
- d. Describe the process of data analysis; and
- e. Demonstrate how the evaluation will be used for program improvements.



PROGRAM AREA 5 OUTREACH AND REFERRAL SERVICES

The District Nail Salon, Barber and Beauty Shop Demonstration Project

The District of Columbia's HIV/AIDS Administration is seeking applicants to provide Outreach and Referral Services to the citizens of the District via Beauty and Barber Shops. As much as discussions of a personal nature are commonplace in these venues, men and women each spend a considerable amount of time in salons and are likely to continue with a single shop/stylist once a relationship is established. HAA believes that using Nail Salons, Beauty and Barber Shops as venue for the dissemination of health information is a unique opportunity.

Initiatives funded under this Program Area shall provide programs and services to reach persons at increased risk of becoming HIV-infected or, if already infected, of transmitting the virus to others, with the goal of reducing the risk of these events occurring. The program can make use of Early Intervention Strategies (EIS) that go beyond the normal scope of prevention intervention. These programs should be directed to persons whose behaviors or personal circumstances place them at high risk. Examples of high risk behaviors or situations include men having sex with men; exchanging sex for drugs; money or services provided; housing, or food; injecting drugs; having a newly diagnosed STD; having sex partners who are HIV-infected or who engage in high-risk behavior(s) and being homeless.

Outreach and referral services under this initiative will provide information to persons at risk of infection of how to obtain specific prevention and treatment services, such as counseling, testing, primary medical services, substance abuse and mental health treatment, case management, AIDS Drug Assistance, partner counseling and referral services, and STD screening and treatment. Public information programs and messages should be based on an assessment of needs in each local area. Messages to communicate through public information programs may include how to navigate the health care delivery system once aware of your HIV status; how HIV is and is not transmitted; how to avoid becoming infected; what the impact of other STDs is on the risk of HIV transmission; what to do if you think you might be infected; the benefits of knowing your serostatus, including early diagnosis and treatment for HIV disease; and how to talk to your partners, children, doctor, friends, neighbors, and employees about HIV prevention.

SUGGESTION: In the Project Description Narrative, include names of specific locations, establishments, and schedule where outreach will be performed - such as "The Big Head Barbershop" Fridays, from 11 p.m. until close. Be brief

Available Funding

There is a maximum of \$150,000 available in this Program Area, supporting 2-3 applicants in the amount of \$50,000 - \$75,000 each.



Applicant Responsibilities

The applicant is responsible for:

- 1) Identifying Nail Salons and Barber/Beauty Shops willing to participate in the project;
- 2) Working with HAA program staff to create outreach materials and training mechanisms which do not require a burdensome amount of time to communicate;
- 3) Using Nail Salons and Barber and Beauty Shops as venue for dissemination of HIV/AIDS literature and referral information;
- 4) Overcoming the many distractions of the venue to permit the effective dissemination of health information;
- 5) Maintaining referral-tracking mechanism; and
- 6) Ensuring materials are culturally competent, developmentally appropriate, linguistically specific, and sensitive to sexual identity.

The applicant is responsible for demonstrating the following:

- 1) Knowledge of HIV/AIDS Epidemiology, modes of transmission and HIV/AIDS service organizations;
- 2) Knowledge of the District of Columbia's wards and boundaries;
- 3) Experience outreaching to diverse populations;
- 4) Ability to refer individuals to the appropriate HIV/AIDS services;
- 5) Knowledge of Beauty/Barber Shop culture in the District of Columbia; and
- 6) Disseminate materials directed to hard-to-reach audiences and populations heavily affected by the HIV epidemic.

Evaluation

The applicant is responsible for providing the following information as it relates to each proposed service area:

- a. Provide a plan of how to evaluate the accomplishments of the proposed service area;
- b. Describe how the data will be gathered;
- c. Explain/describe data collection instruments to be used;
- d. Describe the process of data analysis; and
- e. Demonstrate how the evaluation will be used for program improvements.



REVIEW AND SCORING OF APPLICATIONS

Review Panel

The review panel for this RFA is composed of neutral, qualified, professional individuals who have been selected for their unique experiences in the human service, public health, data analysis, health program planning, evaluation, social services planning and implementation. The review panel will review and score each applicant's application, and when the review panel has completed its review, the panel shall make recommendations for awards based on the scoring process. HAA shall make the final funding determinations.

SCORING CRITERIA (Ryan White Title II)

Criterion A Theoretical and Technical Soundness of the Proposed Plan and Operation (Total 35 Points)

1. The objectives of the proposed project are clearly defined, measurable and time-specific. **(5 Points)**.
2. The proposed project will contribute to the achievement of the established objectives in the designated priority area(s). **(5 Points)**
3. The soundness of the proposed methodology/approach is demonstrated. The application makes use of protocols and/or operating procedures that are appropriate for the methodology proposed, i.e., hours of operation. **(5 Points)**
4. The proposed impact of the program on the target population(s) is clearly delineated and justified: **(10 Points)**
 - a. By the extent to which the program will enhance access and address identified barriers to care for the target population(s);
 - b. By the extent to which the proposed project will ensure geographic and physical access to services for the target population(s), i.e., transportation; and
 - c. By the extent to which the proposed project/services will meet the specific needs of the target population(s).
5. The proposed project will enhance the continuity of patient care. **(5 Points)**
6. Appropriate letters or memoranda of agreement that demonstrate formal linkages and/or collaboration with other service providers are included. **(5 Points)**



Criterion B Relevant Experience and Organizational Capability (Total 40 Points)

Previously funded applicants shall describe how Ryan White Title II services were provided and how the target goals of the current Title II grant through June 30, 2002 were accomplished.

Applicants not currently receiving Ryan White Title II funds in the program area (s) for which funding is requested shall demonstrate the ability to achieve stated objectives, meet service delivery targets and effectively utilize funds requested through evidence of an aggressive marketing plan/program and linkages with referral resources including other service providers of the target population(s), i.e., referral agreements, memoranda of understanding, shared service arrangement, partnerships, coalitions, etc.

1. The application demonstrates the knowledge and experience relevant to the service applied for and in serving the target population, including: **(15 Points)**
 - a. Demonstrated support for the project from the Board of the organization applying;
 - b. The proposed project represents an expansion or enhancement of an already existing program;
 - c. The applicant demonstrates competence in the provision of the services for which funding is requested; and
 - d. The applicant has relevant experience with the population(s) and geographic area(s) to be served.
2. The application demonstrates cultural competency, sensitivity and appropriateness (racial, ethnic, economic, gender, disability, sexual orientation, etc.) by the following: **(10 Points)**
 - a. The applicant has identified and has gained an understanding of issues affecting the target population(s) by providing a mechanism for input from community leaders, civic organizations and advocates for and/or members of the target population(s) in planning and implementation of proposed services;
 - b. Members of the target population (or in the case of children, adolescents, active substance abusers, homeless and the chronically mentally ill, persons with experience in advocating for the target population(s)) are represented among staff, management, the board of directors and/or advisory body/bodies;
 - c. Language issues are addressed through the availability of staff with appropriate communication skills, including American Sign Language (ASL);



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- d. Sensitivity to issues of race/ethnicity, gender, culture/lifestyle and sexual orientation is demonstrated through the establishment of operating procedures which are accommodating and staffing policies which are compatible to the needs of the population(s) to be served; and
 3. The applicant demonstrates the capacity to administer the proposed program. **(10 Points)**
 4. The applicant demonstrates provision of flexible schedule that provides for evening and weekend hours of operation. **(5 Points)**

Criterion C Sound Fiscal Management and Reasonable Budget (Total 15 Points)

1. The applicant demonstrates that the proposed budget is reasonable, realistic and will achieve project objectives by the resources assigned to the program and staff. **(15 Points)**

Criterion D Evaluation/Quality Assurance (Total 10 Points)

1. The applicant provides evidence of how it will comply with quality assurance protocols developed by the Ryan White Planning Council, the US Public Health Service or other recognized bodies for the delivery of various health and support services as is appropriate to the service. **(5 Points)**
2. The applicant provides evidence of how the various services delivered will be evaluated. Evaluation will be with respect to performance outcomes and attainment of program targets. **(5 Points)**

Decision on Awards

The recommendations of the review panels are advisory only and are not binding on the Department of Health. The final decision on awards vests solely with the District of Columbia, Department of Health. After reviewing the recommendations of the review panels and any other information considered relevant, the Agency Director shall decide which applicants to award funds and the amounts to be funded. Disbursements of awards are contingent on receipt of federal award.



SECTION VII HOUSING OPPORTUNITIES FOR PERSONS WITH HIV/AIDS (HOPWA)

PROGRAM AREA 1 SHORT -TERM TRANSITIONAL HOUSING

HAA is soliciting applications from qualified applicants to provide transitional housing for District residents with HIV/AIDS. The applicant shall own or contract with an owner that has an existing structure that agrees to rent units in the building. Short-Term Transitional Housing Program will target African Americans or Latinos with HIV/AIDS. The housing rental assistance shall not exceed 6 months. The applicant is responsible for rental unit payments. Clients are individuals transitioning from emergency housing, living on the streets, newly released inmates, or detoxification programs and who are not ready for independent living but need a safe haven for stabilization and entry to a more supportive housing program.

For most people, having stable housing is associated with a sense of well-being, independence, and health. For those infected with HIV/AIDS, housing provides a point of contact from which to arrange or receive community based health and supportive services.

African Americans account for up to 50% of new HIV infections and Latinos account for 19% of new infections, though they account for only approximately 12% and 13% of the U.S. population, respectively. Hispanic and African American women account for 77% of new infections among females in the U.S. Approximately one in 50 African American males and one in 160 African American females is infected with HIV.

According to December, 2000 report of the U.S. Conference of Mayors:

- Single women comprise 44% of the homeless, single women 13%, families with children 36%, and unaccompanied minors 7%;
- The homeless population is about 50% African American, 35% white, 12% Hispanic, 2% Native American, and 1% Asian.

Homeless people live on the street, in shelters, in cars, frequent hospitals, and park benches. Many other people live in precarious situations --- with family or friends in crowded housing, housed temporarily in institutions like prisons, hospitals, or paying too much of their income for rent. Together, all of these situations make up the pool of chronic homelessness.

Transitional housing for six months is appropriate for housing stabilization. In addition, this type of housing fills the HIV/AIDS housing gap in the District of Columbia for this population. Applicant must demonstrate a level of experience an expertise in working with the chronic homeless with multiple life issues. HIV experience is not a criterion for this program area. The program area is not a residential treatment and does not require substance abuse history or significant clean time to receive housing assistance.

The housing facility must be located in the District of Columbia. The applicant must include a lease or deed to the property. The program is a 24 hours drug free facility. Staffing needs to



reflect the proposed population. The following should be adhered to and demonstrated in application at a minimum:

- Written guidelines for tenants rights and responsibilities;
- Programming which promotes the tenants achieving goals of residential stability, increased skill level and or income for greater self-sufficiency;
- Housing documentation which meets appropriate health, fire, building, and zoning codes;
- Private living facilities with adequate space for eating, bathing, and leisure; and
- Written grievance policies must be included in application;

Available Funding

A total of \$600.000 will be available to fund two or three organizations.

Applicant Responsibilities

The applicant is responsible for:

1. Providing supportive services based on assessments and client's need;
2. Providing project-based transitional housing for 6 months;
3. Establishing program fees calculations and standards based on HAA Housing Program parameters;
4. Increasing participant basic skill level and or income;
5. Assessing client for job readiness, job training, or employment;
6. Registering all participants with the Centralized Housing Intake and Assessment Agency/ Gatekeeper;
7. Obtaining a Housing Quality Standards (HQS) review of all units by the assigned agency;
8. Participating in the centralized waiting list program for HAA funded slots;
9. Developing a strategy / process to transition participants to long- term-housing and or/ self-sufficiency; and
10. Developing outcome measures to indicate success of the program in serving the target population and the numbers served per quarter; the number of participants placed in long-term housing; and achieving self-sufficiency.

Evaluation

Applicant should detailed a program evaluation of how various services delivered will be evaluated by a qualified third party. Evaluation method at a minimum should include performance outcomes and attainment of program goals.



PROGRAM AREA 2 MULTI-SERVICE DAY CENTER (PILOT PROGRAM)

HAA is soliciting applications from faith-based organizations, community –based organizations, and non-profit agencies to administer a multi- service day center in Ward 8 of the District of Columbia. This program will serve homeless adults with HIV/AIDS. The applicant shall meet basic health and social service needs.

According to Census 2000, there were 572,000 people living in the District of Columbia (The Community Partnership for the Homeless, 2002 Report to the Community, 2002). According to this report, approximately 15% are living in poverty. This means there are 85,800 poor people living in the nation’s capital. In actual numbers, a total of 14,984 of the 85,800 participate in the homeless continuum i.e., shelters, transitional housing, and permanent housing funded by the Community Partnership on Homelessness. This report estimated based on a point in time survey conducted, that 1-in-5 of all poor people in the District experienced being homeless at some time in 2001.

Ward 8 has an estimated population of 72,200 in 1990. Ward 8 has the youngest population of any Ward. It has the lowest number of households of any wards in the city. According to the Title 10 D.C. Office Documents Planning and Development, the mean household size remains the highest of any ward in the city. Ward 8 has the lowest median household income of any ward in the city in 1989. It has the highest percentage of households with income under \$20,000 in 1990. It is documented with having the highest poverty rate in 1989. Based on these cited demographics, the proposed program area is appropriate for this Ward as a pilot to enhance the quality of services in Ward 8 for persons with HIV/AIDS. This document suggests limited social or health services in Ward 8.

The applicant shall house this pilot program in Ward 8. The program shall be operational at a minimum 8 hours daily to provide a place for the homeless with HIV/AIDS to congregate during the day when the shelters are closed. The applicant is responsible for detailing programming necessary for the homeless. At minimum, the applicant shall provide staffing to address the medical and social needs of the clients. The applicant shall submit Memorandum of Understanding with homeless shelters with specific referrals and service provision accompanied in the application.

Available Funding

A total of \$400,000 will be available to fund one organization.



Applicant's Responsibilities

The applicant is responsible for the following:

1. Providing a space for showering;
2. Providing personal hygiene items on premises;
3. Providing or linkage to a clothing bank;
4. Providing two nutritious meals and a snack;
5. Providing access to health screenings by a nurse;
6. Providing access to case management services;
7. Establishing linkages with emergency shelters to identify PLWHAs who are homeless;
8. Providing a psychosocial assessment on all participants;
9. Assisting with linking to employment opportunities or training;
10. Linking participants with the Gatekeeper Agency;
11. Developing outcome measures to indicate success of the program in serving the target population in linkage to health care, housing, intensive case management services, and improved self-sufficiency and stabilization; and
12. Ensuring telephone access for messages and mail pick up.

Evaluation

Applicant shall provide a detailed evaluation plan of how various services delivered will be evaluated. Evaluation method at a minimum should include performance outcomes and attainment of program goals.



PROGRAM AREA 3 HOUSING QUALITY STANDARDS INSPECTION (HQS)

HAA is soliciting applications from qualified private housing inspectors in the District of Columbia to conduct housing quality standards inspections (HQS) for HAA funded rental units in the District of Columbia.

HAA housing program is mandated by Housing Urban Development (HUD) to ensure all rental units assisted with HAA funds are in compliance within the local housing quality standards (HQS) regulations.

HQS inspections ensure rental units funded by HAA are safe, sanitary, and secure for persons living with HIV/AIDS and their families. It is required that all HAA funded rental units be inspected at the time of occupancy, annual, and re-inspection. The applicant shall demonstrate the capability of conducting inspections within a two- week interval of the HAA funded occupied units. The applicant shall demonstrate the capability to conduct initial inspections within 72 hours of the request. The applicant shall submit a draft schedule for initial inspections and ongoing inspections. Applicant should demonstrate their knowledge about lead base paint and the treatment of units with lead. The applicant shall be based in the District of Columbia. Applicant's inspectors license and liability insurance must accompany the application. The applicant shall have the capability to provide a minimum of 500 inspections in a year. The applicant shall have an office space and clerical support for the implementation of this program. Applicant shall submit a staffing plan to implement the inspections.

Available Funding

A total of \$100,000 will be available to fund one organization.

Applicant Responsibilities

The applicant is responsible for:

1. Scheduling and performing HQS inspections for HAA funded units within 72 hours of request from the Gatekeeper;
2. When requests received from the Gatekeeper or HAA, providing HQS inspections before client occupancy, conduct annual inspection, compliance inspections for units that fail/pass, and inspections when requested by HAA or Gatekeeper resulting from complaints;
3. Submitting a monthly invoice package that includes: reimbursement request, a listing of HQS inspections completed that month by unit voucher number, inspector name, type of HQS inspection, HQS rate, pass/fail results, and total cost;
4. Ensuring that all inspectors attend HIV/AIDS 101 and confidentiality training. Inspectors must sign a HAA confidentiality agreement statement;
5. Keeping all HQS inspections performed in a confidential locked filing cabinet;



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6. Adhering to the HAA approved budget and work plan which are incorporated in reference;
 7. Conducting HQS inspections that address the minimum requirements established by HUD regulations as well as any additional inspection areas; and
 8. Ensuring HQS inspections cover requirements under Housing Urban Development, Code of Federal Regulations- Lead-based paint.

Evaluation

The applicant provides evidence of how the proposed services will be evaluated. Evaluation plan at a minimum should include performance outcomes and attainment of program objectives.



PROGRAM AREA 4 HOUSING MEDIATION PROGRAM

HAA is soliciting qualified applicants of University Legal Clinics and Community Mediation Programs to develop a mediation process for clients in HAA funded housing or receiving HIV related housing services in the District of Columbia. The purpose of the program is to establish mechanisms to assist in the resolution of disputes between HIV housing providers and tenants. In addition to mediating disputes, the program shall convene a grievance panel hearing in cases whereby a tenant wishes to grieve termination of rental assistance, denial of housing related services request, and eviction from HAA funded housing. The applicant shall be familiar with D.C. Housing Laws; tenant's rights, landlord rights; federal housing laws, discrimination laws in D.C.; rental laws and regulations. The mediation program should provide housing related education to tenants and HAA funded providers.

Recent studies confirm that persons living with HIV/AIDS must have stable housing to access comprehensive healthcare and adhere to complex HIV/AIDS drug therapies. However persons living with HIV/AIDS (PLWHA) present challenging housing needs ranging from health related sporadic employment, poor credit history, non-payment of rent, poor housing conditions, and eminent evictions, and lack of affordable housing.

HAA funds non-profits to provide housing for district residents living with HIV/AIDS and their families. In addition to housing, the housing providers are responsible for providing or linkage of supportive services. Due to the array of bio-psychosocial issues and declining health, tenancy is jeopardized. According to the District's grievance policies and procedures, HAA funded program clients can challenge any action(s) by a housing provider affecting receipt, termination, or conditions of services. The policy incorporates regulations found in Code of Federal Regulations sanctioned by Housing Urban Development (HUD).

In compliance with HUD's regulations, program clients receiving HAA funded housing or housing related services have a right to appeal an action by a housing provider. This program area would establish a formal process and procedures whereby a program client and housing provider are not able to resolve a dispute through the provider's in-house grievance process, the client can request mediation. The purpose of the mediation is to resolve a disagreement and develop mediation plan signed by both parties.

The applicant shall be based in the District of Columbia serving District residents and their families affected with HIV, low-income, and supported by HAA funded housing or housing related services. The applicant shall submit days and hours of operation. Evenings and weekend operation are encouraged.

Available Funding

A total of \$100,000 will be available for funding one applicant under this program area.



Applicant Responsibilities

The applicant is responsible for:

1. Developing/administering a mediation program for housing providers and clients supported by HAA funding;
2. Establishing formal linkages with the Ryan White Title I provider responsible for assisting clients with grievances;
3. Developing educational materials and flyers outlining HOPWA regulations, fair housing laws, District landlord Tenant and other applicable laws and regulations;
4. Providing presentations and training as requested by HAA to educate clients and providers;
5. Facilitating a grievance panel hearing;
6. Drafting of a mediation plan signed by both parties;
7. Supervising law students supervised by trained mediators or community based mediation program with two years of mediation experience;
8. Participating in orientation for new HAA funded housing providers;
9. Participating in HIV 101 training; and
10. Demonstrating knowledge of the Fair Housing and Equal Opportunity parameters relevant to the program area.

Evaluation

The applicant shall include a detailed program evaluation plan at minimum performance outcomes and attainment of program targets. The applicant shall address in the evaluation plan the following projections:

1. Number of clients requesting mediation;
2. Number of mediation resolution;
3. Number of evictions/ problems unsolved;
4. Number of grievance panel hearings convened; and
5. Number of clients referred for legal services.

Note: The Gatekeeper and housing providers are not eligible to apply.





REVIEW AND SCORING OF APPLICATIONS (HOPWA PROGRAM AREAS 1-4)

Review Panel

The review panel for this RFA is composed of neutral, qualified professional individuals who have been selected for their unique experiences in the public health, health program planning implementation, and the housing fields. The review panel will review, score and rank each application. The Director of Health shall make the final funding determinations.

Review Process

Each proposed program areas will be reviewed and evaluated separately by the reviewers. Applicants should identify their minority status in their applications. Applicants and reviewers shall be familiar with the HOPWA regulations found in the Code of regulations, 24 CFR 574 Part 300. HOPWA regulations will provide a standard for defining eligible activities, including but not limited to tenant-based rents, administrations, operations and support services.

Scoring Criteria

Applicants' application submissions will be objectively reviewed against the following specific scoring criteria.

Criterion A Theoretical And Technical Soundness of the Application (Total 40 Points)

1. The proposed program is well defined and specific to the target population cited in the priority area. **(5 Points)**
2. The goals and objectives of the program are clearly defined, measurable and time specific. At a minimum, the applicant responsibilities in the program scope must be incorporated in the goals and objectives. **(10 points)**
3. The proposed activities and work plan(s) will result in the accomplishment of the project objectives. The proposed project would contribute to the achievement of the established objectives in the designated priority area(s). **(10 points)**
4. The soundness of the methodology/ approach on the target population(s) is demonstrated as to: **(10 points)**
 - a. Successful residential stability and or transition to permanent or independent housing;
 - b. Increased skill level and or education;
 - c. Increased income level;
 - d. Improve basic living skills; and



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- e. Extent to which the proposed project will specify the support services for self-sufficiency.
5. Letters of Memorandum of Agreement that demonstrated formal linkages and or collaboration at a minimum with: **(5 points)**
 - a. Mental health providers;
 - b. Substance abuse providers;
 - c. Employment/ and or training programs; and
 - d. Vocational rehabilitation services.

Criterion B Relevant Experience And Organizational Capability (35 Points Total)

1. The applicant demonstrated the knowledge relevant and experience to the service applied for and in serving the target population, including: **(10 Points)**
 - a. Applicant demonstrate competence in the provision of the services for which funding is requested and consistency with the values presented in the program scope; and
 - b. Applicant has experience with the population and geographic area to be served.
2. Applicant demonstrated knowledge of and adherence to 24 CRF 574 for HOPWA- funded service areas and sub- budgets. **(5 Points)**
3. Cultural competency, sensitivity and appropriateness (racial, ethnic, economic, gender, age, disability, sexual orientation, etc.) of services are demonstrated in the following ways: **(20Points)**
 - Applicant has demonstrated an understanding of issues affecting the target population(s) by providing a mechanism for input from the community, civic organizations, and advocates for and or members of the target population(s) in planning, advisory, and implementation of proposed services.
 - Memoranda of understanding or letters of collaboration from community and advocacy related groups of the target population(s) are provided.
 - Language issues are addressed through the availability of staff with appropriate communication skills.



Criterion C Sound Fiscal Management And Reasonable Budget (Total 15 Points)

1. The applicant demonstrates that the proposed budget is reasonable, realistic and will achieve project objectives by the resources assigned to the program and staff. **(10 Points)**
2. Budget allocations indicate the ability to account for HOPWA eligible activities separately. **(5 Points)**

Criterion D Quality Assurance (Total 10 Points)

1. The applicant provide evidence of how it will comply with quality assurance Protocols developed by the U.S. Public Health Service, HOPWA eligible activities, client eligibility, and rent calculations in accordance with 24 CRF 574, or other recognized bodies for the delivery of various health and support services as is appropriate to the service for which the applicant applied. **(5 Points)**
2. The applicant provides evidence of how the various services delivered will be evaluated by a qualified third party. Evaluation method at a minimum should include performance outcomes and attainment of program targets. **(5 Points)**

Decision on Awards

The recommendations of the review panels are advisory only and are not binding on the Department of Health. The final decision on awards vests solely with the District of Columbia, Department of Health. After reviewing the recommendations of the review panels and any other information considered relevant, the Agency Director shall decide which applicants to award funds and the amounts to be funded. Disbursements of awards are contingent on receipt of federal award.



PROGRAM AREA 5 CLIENT EMPOWERMENT FOR SELF-SUFFICIENCY PROGRAM

HAA is seeking applications from qualified applicants to administer/develop a Client Empowerment for Self-Sufficiency Program for HAA funded housing program clients in the District of Columbia. The purposes of the program are: 1. Develop and implement a program promoting self-sufficiency; 2. Develop linkages to training programs; 3. Create marketable skill curriculum for job placement and retention; and 4. Develop linkage to existing local, federal, and private job training and placement programs.

A significant portion of Persons Living with HIV/AIDS (PLWHA) is capable of working and performing average daily functions. These individuals need job training and in some instances retraining, and employment assistance to enable them to support themselves and meet they're housing needs. This program area invites applicants to mobilize the existing employment and training networks in placing PLWHA in economically rewarding positions. While these jobs may not necessarily lead to full self-sufficiency, they will assist some PLWHA in promoting opportunities and enhanced quality of life.

The applicant shall demonstrate the ability to create a formalized support function to access existing District, Federal, and private resources. The applicant shall submit memorandums of agreement outlining referrals and services to be provided with existing local, federal, and private organizations. The applicant shall demonstrate experience in working with persons with both physical and mental disabilities. The applicant shall be based in the District of Columbia. The hours of operation should be cited in application. Evenings and week- end hours are encouraged. Programming must detail the proposed goals and objectives consistent with the program area.

Available funding

A total of \$150,000 will be available to fund one private or non-profit organization.

Applicant's Responsibilities

The applicant is responsible for the following:

1. Providing employment assistance for clients in HAA funded housing programs;
2. Establishing linkages with existing federal, local, or private job training and placement programs;
3. Establishing Memorandum of Understanding with the HAA funded centralized housing agency and housing providers for referrals;
4. Developing individual service plan for employment and education objectives;
5. Providing at a minimum, the following linkage components: job readiness, job training, placement and retention, transportation stipends, childcare, and clothing referrals/ or vouchers. The individual plan for education or employment shall include employment outcomes, vocational rehabilitation services, GED programs, and referrals to providers of employment services.



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6. Conducting a survey and needs assessment of education, job training, and placement service needs for persons with HIV/AIDS.
 7. Providing for a third party evaluation of the program;
 8. Developing outcome measures to indicate the success of the program in serving the target population in linkages to job readiness, training, and eventually job placement;
 9. Ensuring linkages to paid training internships;
 10. Providing educational assessment/testing/ and preparation for the GED; and
 11. Assisting with resume preparation.

Evaluation

The applicant shall provide evidence of how the proposed services delivered will be evaluated by a third party. Evaluation plan at a minimum should include performance outcomes and attainment of program objectives.



REVIEW AND SCORING OF APPLICATIONS

(Client Empowerment for Self-Sufficiency)

Review Panel

The review panel for this RFA is composed of neutral, qualified, professional individuals who have been selected for their unique experiences in the public health, vocational, and employment placement fields. The review panel will review, score, and rank each applicant's application. The Director of the Department of health shall make the final funding determinations.

Review Process

Each proposed program area will be reviewed and evaluated separately by the reviewers. Reviewers shall be familiar with the local, private, and federal resources for economic self-sufficiency.

Scoring Criteria Client Empowerment for Self-Sufficiency

Applicant's application submission will be objectively reviewed against the following specific scoring criteria.

Criterion A Theoretical and Technical Soundness of the Application (Total 50 Points)

1. The proposed program is well defined and specific to the target population cited in the priority area.
2. The goals and objectives of the program are clearly defined, measurable, and time specific. At a minimum, the applicant responsibilities in the program scope must be incorporated in the goals and objectives.
3. The proposed activities and work plan(s) will result in the accomplishment of the project objectives. The proposed project would contribute to the achievement of the established objectives in the designated priority area(s).
4. The soundness of the methodology/approach on the target population(s) is demonstrated by:
 - Developing a strategy which highlights the economic self sufficiency continuum with the target population;
 - Developing a needs assessment survey tool with emphasis on education, employment, training, and retention; and



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- The extents to which the projects specify those support services offer to prepare and enhance self-sufficiency.
5. Letters of Memorandum of Agreement that demonstrates formal linkages at a minimum:
- HAA funded housing providers and Gatekeeper;
 - Training programs;
 - Local, federal, and private agencies with job readiness, training programs, vocational rehabilitation, etc.; and
 - GED preparation programs.

Criterion B Relevant Experience And Organizational Capability (40 Points Total)

1. The applicant demonstrated the knowledge relevant and experience applied for and in serving the related target population. **(20 Points)**
2. Applicant demonstrates competence in the provision of the services for which funding is requested and consistency with the values presented in the program scope. **(10 Points)**
3. Cultural competency, sensitivity and appropriateness (racial, ethnic, economic, gender, age, disability, sexual orientation, etc.) of services are demonstrated in the following ways:
 - a. Applicant has demonstrated an understanding of issues affecting the target population(s) by providing input from the target community. **(5 Points)**
 - b. Language issues are addressed through the availability of staff with appropriate communication skills. **(5 Points)**

Criterion C Sound Fiscal Management And Reasonable Budget (Total 5 Points)

1. The applicant demonstrates that the proposed budget is reasonable, realistic and will achieve project objectives by the resources assigned to the program.

Criterion D Quality Assurance (Total 5 Points)

1. The applicant provides evidence of how the various services delivered will be evaluated by a third party. Evaluation method at a minimum should include performance outcomes and attainment of program targets.



Decision on Awards

The recommendations of the review panels are advisory only and are not binding on the Department of Health. The final decision on awards vests solely with the District of Columbia, Department of Health. After reviewing the recommendations of the review panels and any other information considered relevant, the Agency Director shall decide which applicants to award funds and the amounts to be funded. Disbursements of awards are contingent on receipt of federal award.



PROGRAM AREA 6 TRANSITIONAL HOUSING FOR WOMEN

HAA is soliciting applications from qualified applicants to provide transitional housing for women with HIV/AIDS in the District of Columbia. The applicant shall be proficient and knowledgeable about women-specific issues and housing experience. The applicant shall own or contract with an owner of an existing structure who agrees to rent units in the building to women with no children for a 12 month period. The applicant is responsible for rental unit payments. The program shall target women who are homeless or at risk of homelessness. Women who are not ready for independent living due to chronic homelessness, displaced, substance abuse, victims of violence, severe HIV infection, mental health issues, and released from hospitals or correctional facilities.

Women in the metropolitan area continue to face numerous barriers to care and housing has emerged as one of the most significant crises facing women with HIV/AIDS. According to studies and needs assessment conducted by HAA, over 50% of all people with AIDS will need assistance with housing. State and local government receives federal funds for people with AIDS. Housing Opportunities for People With AIDS (HOPWA) provide grants to local communities, states, and non-profit organizations to benefit persons with HIV/AIDS and their families who are low-income.

HAA partners with non-profit and faith-based organizations in meeting the housing needs of persons with AIDS through a competitive grant process. In addition to housing assistance, HAA funded housing providers links or provide supportive services to individuals and their families. Of the current HAA funded providers, limited women specific providers with the understanding of the supportive services unique to women.

The applicant shall demonstrate a comprehensive service networks specific to women. In addition, the applicant must include letters of support and a detail plan for coordination of services. The applicant shall demonstrate the capability to provide supportive services internally, proceed by demonstration of staff experiences and expertise in the particular service area. The staff shall mirror ethnically and gender specific to the proposed population.

Applicant shall operate 24 hours in the District of Columbia. The applicant shall clearly indicate the number of women proposed to serve, the number of units, and specific programming. In the proposed programming, applicant shall detail the movement toward self-sufficiency, increased income, and long- term independent housing. The applicant shall include in application a lease for the proposed site. If the facility is owner owned, the applicant shall submit the deed with application.

Available Funding

A total of \$375,000 will be available to fund one organization.



Applicant Responsibilities

The applicant is responsible for:

1. Providing supportive services and or linkages to support services;
2. Providing referral to a two year transitional housing program if applicable;
3. Utilizing the comprehensive housing plan develop in collaboration with the Gatekeeper;
4. Establishing program fees and standards based on HAA Housing program parameters;
5. Increasing participant basic skill level and income;
6. Assessing participants for job readiness, job training, job placement;
7. Registering all participants with the Centralized Housing Intake and Assessment Agency;
8. Obtaining a Housing Quality Standards (HQS) inspection review of all units by the assigned agency;
9. Participating in the centralized waiting list program for HAA funded slots;
10. Developing a strategy/ process to transition participants to long -term housing and or self-sufficiency; and
11. Developing outcome measures to indicate success of the program in serving the target population and the numbers served, the number of participants placed in long-term or independent housing, the number of participants with increased income through employment; and the number of participants with enhanced self-sufficiency.

Evaluation

Applicant shall detail a program evaluation of how various services delivered will be evaluated by a qualified third party. Evaluation method at a minimum should include performance outcomes and attainment of program goals.





REVIEW AND SCORING OF APPLICATIONS

Transitional Housing for Women

Review Panel

The review panel for this RFA is composed of neutral, qualified professional individuals who have been selected for their unique experiences in the public health, health program planning implementation, and the housing fields. The review panel will review, score and rank each applicant's application. The Director of Health shall make the final funding determinations.

Review Process

Each proposed program area will be reviewed and evaluated separately by the reviewers. Applicants should identify their minority status in their applications. Applicants and reviewers shall be familiar with the HOPWA regulations found in the Code of regulations, 24 CFR 574 Part 300. HOPWA regulations will provide a standard for defining eligible activities, including but not limited to tenant-based rents, administrations, operations and support services.

Scoring Criteria

Applicants' application submissions will be objectively reviewed against the following specific scoring criteria.

Criterion A	Theoretical And Technical Soundness Of The Application (Total 40 Points)
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1. The proposed program is well defined and specific to the target population cited in the priority area. **(5 Points)**
2. The goals and objectives of the program are clearly defined, measurable and time specific. At a minimum, the applicant responsibilities in the program scope must be incorporated in the goals and objectives. **(10 Points)**
3. The proposed activities and work plan(s) will result in the accomplishment of the project objectives. The proposed project would contribute to the achievement of the established objectives in the designated priority area(s). **(10 Points)**
4. The soundness of the methodology/ approach on the target population(s) is demonstrated as to: **(10 Points)**
 - Successful residential stability and or transition to permanent or independent housing;
 - Increased skill level and or education;
 - Increased income level;



-
- Improve basic living skills; and
 - Extent to which the proposed project will specify the support services for self-sufficiency.
5. Letters of Memorandum of Agreement that demonstrated formal linkages and or collaboration at a minimum with: **(5 Points)**
- Mental health providers;
 - Substance abuse providers;
 - Employment/ and or training programs; and
 - Vocational rehabilitation services.

Criterion B Relevant Experience And Organizational Capability (40 Points Total)

1. The applicant demonstrated the knowledge relevant and experience to the service applied for and in serving the target population, including: **(10 Points)**
 - The applicant demonstrates competence in the provision of the services for which funding is requested and consistency with the values presented in the program scope; and
 - The applicant has experience with the population and geographic area to be served.
2. The applicant demonstrates knowledge of and adherence to 24 CFR 574 for HOPWA-funded service areas and sub- budgets. **(5 Points)**
3. Cultural competency, sensitivity and appropriateness (racial, ethnic, economic, gender, age, disability, sexual orientation, etc.) of services are demonstrated in the following ways: **(5 Points)**
4. The applicant has demonstrates an understanding of issues affecting the target population(s) by providing a mechanism for input from the community, civic organizations, and advocates for and or members of the target population(s) in planning, advisory, and implementation of proposed services. **(10 Points)**
5. Memoranda of understanding or letters of collaboration from community and advocacy related groups of the target population(s) are provided. **(5 Points)**
6. Language issues are addressed through the availability of staff with appropriate communication skills. **(5 Points)**



Criterion C Sound Fiscal Management And Reasonable Budget (Total 10 Points)

1. The applicant demonstrates that the proposed budget is reasonable, realistic and will achieve project objectives by the resources assigned to the program and staff. **(5 Points)**
2. Budget allocations indicate the ability to account for HOPWA eligible activities separately. **(5 Points)**

Criterion D Quality Assurance (Total 10 Points)

1. The applicant provides evidence of how it will comply with quality assurance Protocols developed by the Ryan White Planning Council, the U.S. Public Health Service, HOPWA eligible activities, client eligibility, and rent calculations in accordance with 24 CRF 574, or other recognized bodies for the delivery of various health and support services as is appropriate to the service for which the applicant applied. **(5 Points)**
2. The applicant provides evidence of how the various services delivered will be evaluated by a qualified third party. Evaluation method at a minimum should include performance outcomes and attainment of program targets. **(5 Points)**

Decision on Awards

The recommendations of the review panels are advisory only and are not binding on the Department of Health. The final decision on awards vests solely with the District of Columbia, Department of Health. After reviewing the recommendations of the review panels and any other information considered relevant, the Agency Director shall decide which applicants to award funds and the amounts to be funded. Disbursements of awards are contingent on receipt of federal award.



SECTION VIII LIST OF ATTACHMENTS

Attachment A	Applicant Profile
Attachment B	Certifications
Attachment C	Assurances
Attachment D	Original Receipt
Attachment E	Budget
Appendices	



Applicant Profile

**FY 2002 Ryan White Title II
Housing and Support Services Grant**

RFA #0729-02-HAA

PROJECT APPLICANT NAME:

TYPE OF ORGANIZATION

SMALL BUSINESS _____ NON-PROFIT ORGANIZATIONS _____

OTHER _____

CONTACT PERSON: _____

OFFICE ADDRESS: _____

PHONE _____

FAX: _____

TOTAL FUNDS REQUESTED: _____

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Office of the Chief Financial Officer



Certifications Regarding
Lobbying; Debarment, Suspension and Other Responsibility
Matters; and Drug-Free Workplace Requirements

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying" and 28 CFR Part 67, "Government-wide Debarment and Suspension (Non-procurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact.

1. LOBBYING

As required by Section 1352, Title 31 of the U.S. Code. and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 28 CFR Part 69, the applicant certifies that:

- (a) No Federally appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;
- (b) If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form - III, "Disclosure of Lobbying Activities," in accordance with its instructions;
- (c) The undersigned shall require that the language of this certification be included in the award documents for all sub awards at all tiers including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all sub-recipients shall certify and disclose accordingly.

**2. Debarment, Suspension, And Other Responsibility Matters (Direct Recipient)**

As required by Executive Order 12549, Debarment and Suspension, and implemented at 28 CFR Part 67, for prospective participants in primary covered transactions, as defined at 28 CFR Part 67, Section 67.510—

A. The applicant certifies that it and its principals:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c.) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.**1. Drug-Free Workplace (Applicants Other Than Individuals)**

As required by the Drug Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F. for applicants, as defined at 28 CFR Part 67 Sections 67.615 and 67.620—

A. The applicant certifies that it will or will continue to provide a drug-free workplace by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an on-going drug-free awareness program to inform employees about—
 - (1) The dangers of drug abuse in the workplace;
 - (2) The applicant's policy of maintaining a drug-free workplace;



- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and**
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;**
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);**
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will—**
 - (1) Abide by the terms of the statement; and**
 - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;**
- (e) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title to: Department of Health, HIV/AIDS Administration 717 14th St., NW, Suite 1200 , Washington, DC 20005. Notice shall include the identification number(s) of each effected grant;**
- (f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted—**
 - (1) Taking appropriate personnel action against such an employee, up to and incising termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or**
 - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;**
 - (3) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (1), (c), (d), (e),. and (f).**
- B. The applicant may insert in the space provided below the sites) for the performance of work done in connection with the specific grant:**

Place of Performance (Street address, city, county, state, zip code)



Drug-Free Workplace (Applicants who are Individuals)

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, subpart F, for applicants as defined at 28 CFR Part 67; Sections 67.615 and 67.620—

- A. As a condition of the grant, I certify that I will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant; and
- B. If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, I will report the conviction, in writing, within 10 calendar days of the conviction, to:

Department of Health, HIV/AIDS Administration
717 14th St., NW, Suite 1200
Washington, DC 20005

As the duly authorized representative of the applications,
I hereby certify that the applicant will comply with the above certifications.

1. Applicant Name and Address

2. Application Number and/or Project Name

3. Applicant IRS/Vendor Number

4. Typed Name and Title of Authorized Representative

5. Signature

6. Date



ASSURANCES

The applicant hereby assures and certifies compliance with all Federal statutes, regulations, policies, guidelines and requirements, including OMB Circulars No. A-21, A-110, A-122, A-128, A-87; E.O. 12372 and Uniform Administrative Requirements for Grants and Cooperative Agreements - 28 CFR, Part 66, Common Rule, that govern the application, acceptance and use of Federal funds for this federally-assisted project.

Also, the Application assures and certifies that:

1. It possesses legal authority to apply for the grant; that a resolution, motion or similar action has been duly adopted or passed as an official act of The applicant's governing body, authorizing the filing of the application, including all understandings and assurances contained therein, and directing and authorizing the person identified as the official representative of The applicant to act in connection with the application and to provide such additional information as may be required.
2. It will comply with requirements of the provisions of the Uniform Relocation Assistance and Real Property Acquisitions Act of 1970 PL 91-646 which provides for fair and equitable treatment of persons displaced as a result of Federal and federally-assisted programs.
3. It will comply with provisions of Federal law which limit certain political activities of employees of a State or local unit of government whose principal employment is in connection with an activity financed in whole or in part by Federal grants. (5 USC 1501, et. seq.).
4. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act if applicable.
5. It will establish safeguards to prohibit employees from using their positions for a purpose that is or gives the appearance of being motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business, or other ties.
6. It will give the sponsoring agency of the Comptroller General, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the grant.
7. It will comply with all requirements imposed by the Federal-sponsoring agency concerning special requirements of Law, program requirements, and other administrative requirements.
8. It will insure that the facilities under its ownership, lease or supervision which shall be utilized in the accomplishment of the project are not listed on the Environmental Protection Agency's (EPA), list of Violating Facilities and that it will notify the Federal grantor agency of the receipt of any communication from the Director of the EPA Office of Federal Activities indicating that a facility to be used in the project is under consideration for listing by the EPA



9. It will comply with the flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973, Public Law 93-234-, 87 Stat. 975, approved December 31, 1976. Section 102(a) requires, on and after March 2, 1975, the purchase of flood insurance in communities where such insurance is available as a condition for the receipt of any Federal financial assistance for construction or acquisition purposes for use in any area that has been identified by the Secretary of the Department of Housing and Urban Development as an area having special flood hazards. The phrase “Federal Financial Assistance”, includes any form of loan, grant, guaranty, insurance payment, rebate, subsidy, disaster assistance loan or grant, or any other form of direct or indirect Federal assistance.
10. It will assist the Federal grantor agency in its compliance with Section 106 of the National Historic Preservation Act of 1966 as amended (16 USC 470), Executive Order 11593, and the Archeological and Historical Preservation Act of 1966 (16 USC 569a-1 et. seq.) By (a) consulting with the State Historic Preservation Officer on the conduct of investigations, as necessary, to identify properties listed in or eligible for inclusion in the National Register of Historic Places that are subject to adverse effects (see 36 CFR Part 800.8) by the activity, and notifying the Federal grantor agency of the existence of any such properties, and by (b) complying with all requirements established by the Federal grantor agency to avoid or mitigate adverse effects upon such properties.
11. It will comply with the provisions of 28 CFR applicable to grants and cooperative agreements including Part 18. Administrative Review Procedure; Part 22, Confidentiality of Identifiable Research and Statistical Information; Part 42, Nondiscrimination/Equal Employment Opportunity Policies and Procedures; Part 61, Procedures for Implementing the National Environmental Policy Act; Part 63, Floodplain Management and Wetland Protection Procedures; and Federal laws or regulations applicable to Federal Assistance Programs.
12. It will comply, and all its contractors will comply with; Title VI of the Civil Rights Act of 1964, as amended; Section 504 of the Rehabilitation Act of 1973, as amended; Subtitle A, Title III of the Americans with Disabilities Act (ADA) (1990); Title IIX of the Education Amendments of 1972 and the Age Discrimination Act of 1975.
13. In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, sex, or disability against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, U.S. Department of Justice.
14. It will provide an Equal Employment Opportunity Program if required to maintain one, where the application is for \$500,000 or more.
15. It will comply with the provisions of the Coastal Barrier Resources Act (P.L 97-348), dated October 19, 1982, (16 USC 3501 et. seq.) which prohibits the expenditure of most new Federal funds within the units of the Coastal Barrier Resources System.

Signature

Date

Attachment D



*FY2002-2003 Ryan White Title II
& Housing Support Services*

**Office of Research and Analysis
Competitive Services Division
441 4th Street, NW, Room 400 South
Washington, DC 20001**

**HIV/AIDS Administration
RFA #0729-02-HAA
FY 2002-2003 Ryan White Title II
and Housing Support Services Grant**

RECEIPT OF

(Contact Name/Please Print Clearly)

(Organization Name)

(Address, City, State, Zip Code)

Please check area for funding:

- ☐ Community Based Organization Demonstration Project
- ☐ Comprehensive HIV/AIDS Project for Incarcerated Persons and Ex-Offenders
- ☐ Comprehensive Health Care for Women in the District of Columbia
- ☐ Professional Home Health Care
- ☐ Outreach and Referral Services
- ☐ Short-Term Transitional Housing
- ☐ Multi-Service Day Center (Pilot Program)
- ☐ Client Empowerment Program for Self-Sufficiency Program
- ☐ Transitional Housing for Women
- ☐ Housing Quality Standards Inspections (HQS)
- ☐ Housing Mediation

ADMINISTRATIVE USE ONLY:

APPLICATION and _____ COPIES.

RECEIVED ON THIS DATE ✕ 2002

Received by:

Attachment E



*FY 2002 –2003 Ryan White Title II,
& Housing Support Services*

FEDERAL

A. Personnel \$ _____

B. Fringe Benefits \$ _____

C. Travel \$ _____

D. Consultants/Contracts \$ _____

E. Supplies \$ _____

F. Equipment \$ _____

G. Training \$ _____

H. Operating Expenses \$ _____

I. Other Expenses \$ _____

J. Indirect Cost \$ _____

PROJECT TOTAL \$ _____